

# Implementation of a Staff Incentive Plan to Improve Employee Engagement and Clinical Outcomes

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## A little about me...

- 3 Kids, 1 Grandson, 1 Grandkid on the way, and a new Hubby!
- Methodist Diploma Grad!!!!! OSF BSN and MSN, Certifications in Oncology and Quality
- I've done it all over the years
  - Unit Secretary, Nursing Assistant, Bedside Nurse, Nurse Manager (Inpatient and Outpatient Infusion), Quality and Data Abstraction
- Found out....I love it all!







## **My Passion...**

My Passion- Why am I so Quality driven?



## **What Drives You?**















#### **Motivation**

- The process that accounts for an individual's intensity, direction, and persistence of effort toward attaining a goal
  - Stems from a need which must be fulfilled and, in turn, leads to a specific behavior
- Fulfillment results in reward
  - Intrinsic vs Extrinsic



## **Intrinsic**

- Derived from within the individual, non-physical rewards, emotionally connected with the employee
  - Taking pride and feeling good about a job well done
  - Job satisfaction
  - Sense of achievement
  - Good feelings
  - Recognition
  - Work freedom or autonomy

## **Extrinsic**

- Physical rewards coming from an external source directly related to job performance of the employee
  - Pay
  - Bonus or Incentives
  - Benefits
  - Promotion
- "A well designed reward system motivates employees and helps in building positive emotional responses towards the job. It also leads to higher and better performance of employees which has a direct impact on the productivity of the company" (www.Businesstopia.net)

## **Healthcare Today**

- UPC Peoria recognized that clinic staff is intrinsically motivated to provide excellent care for patients
- Todays ambulatory care requires so much more-
  - Chronic condition care and care coordination
  - Prevent hospitalization or readmission
  - Prior authorization
  - Health Maintenance and preventive healthcare including wellness visits and immunizations

## Quality Opportunities- "Gaps in Care"

- In 2015 progress being made in the areas of:
  - Quality and preventive care metrics
  - Workflow development
  - Timely follow up processes
  - Quality metric reporting
- Reports identify 252,972 "Gaps in Care" in 2016
  - Breast and colorectal cancer screening
  - Diabetes care
  - Hypertension/Uncontrolled blood pressure
  - Immunizations
  - Wellness exams

#### Where Did We Start?

- January 2016- still not meeting goals in all areas
- Goals were set lower than most 5 Star Ratings
- Aware that most of the goals would be increased in 2017

Started looking at options to improve numbers in

Q2 2016

Metric	Goal	Jan
DM: Hgb A1c <8	63.5%	66.8
DM: Foot Exam	35%	42.1
DM: Eye Exam	35%	13.3
DM: Nephropathy Assmt	75.6%	79.7
*Breast Cancer Screen	68.1%	66.6
*Colorectal Cancer Screen	54.2%	59.6
*Pneumonia Vaccine	65.2%	42.1
HTN BP < 140/90	77.2%	71.7
*Influenza Vaccine	31.0%	28.1
DM: Hgb A1c >9	23.7%	19.3

## **Incentive Plan Developed**

#### Goals

- Decrease the overall number of Care Gaps by 40%
- Proactively Schedule patients for their next appointment at their current appointment 50% of the time
- Achieve target or better for all of the 2016 priority quality metrics
- Design and deploy a team incentive plan to reward achievement of goals at levels of target and superior performance

## **Care Gaps by Specialty**

Family Practice/ Internal Medicine	Goal	Superior	Pediatrics	Goal	Superior
Breast Cancer Screening	68	81.3	Appropriate Testing Pharyngitis	92.3	94.8
Colorectal Cancer Screening	54.1	80	Asthma Pharmacologic Treatment	36.8	81.2
Diabetes: Eye Exam	35	60	Depression Screening and Follow Up	69.5	87.3
Diabetes: Foot Exam	35	82	Influenza Vaccination	31	46.3
Diabetes: A1c < 8	63.5	86	Immunizations by Age 2	63.5	80
Diabetes: A1c >9	23.7	12	Immunizations Adolescent	88.6	95.6
Diabetes: Nephropathy Assessment	75.6	95	Lead Screen by Age 2	35	50
HTN: BP < 140/90	77.2	89	Pediatric Well Child Check 0-15 Months	56.6	75.5
Influenza Vaccination	31	59	Pediatric Well Child Check 3-6 Years	76.1	80.4
Pneumonia Vaccination	65.2	79.8	Well Child weight/ counseling	35	60

Specialty	Goal	Superior
Breast Cancer Screening	68	81.3
Colorectal Cancer Screening	54.1	80
Influenza Vaccination	29.2	45
Pneumonia Vaccination	48.5	62.9
BMI and follow up	38	52.2
Depression and follow up	69.7	87.3
HTN: BP < 140/90	77.2	89
Tobacco Assessment/Intervention	71.8	90.1
Implementation of HM Reminder Card	Done	

## **Incentive Plan Developed- 2 Components**

#### **Quality Measures**

- Incentivized at Target and Superior Performance
  - Target = UPH System Goal (\$10/measure)
  - Superior = HEDIS 5 Star Rating or CMS 90<sup>th</sup> Percentile (\$15/measure)

#### **Access- Scheduling Next Appointment at Current Appointment**

Incentivized at a tiered rate per percent scheduled

• 25% = \$25.00, 50% = \$50.00, 75% = \$75.00

	# Met	rics Met	\$\$ Paid	\$\$ Paid	Scheduled				Total Potential
Clinic Name	Target	Superior	Target	Superior	at Current	25% (\$25)	50% (\$50)	75% (\$75)	Incentive/Ind
My Clinic	6		\$ 10.00	\$ 15.00	25%	\$ 25.00			\$ 85.00
Another Clinic	5	2	\$ 10.00	\$ 15.00	53%		\$ 50.00		\$ 130.00

<sup>\*</sup> Team payout- all staff members paid equally from front desk to nursing to supervisor

Max Payout \$225/per \*Staff Member!

## **Goals Assessed- But Did We Fail?**

Goal	Result	Met/Unmet
Decrease the overall number of care gaps by 40%	27.3%	Unmet
Proactive schedule patients for their next appointment at their current appointment 50% of the time	40.3%	Unmet
Achieve target or better for all 2016 priority quality metrics	7/10=70%	Unmet
Design and deploy a team incentive plan to reward achievement of above goals at levels of both target and superior performance	Done Q3 16	Met

#### **Results**

#### **Quality Measures**

- Payouts for Q3 and Q4 ranged from \$0 to \$160 per staff member
   per quarter (quality measures and scheduling next)
- Metric performance went from 5 metrics green (met) to 7 metrics green, 2 yellow and only 1 red!
- Diabetic eye exams- new metric with workflow changes in 2016

Metric	Goal	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec
DM: Hgb A1c <8	63.5%	66.8	66.4	66.1	65.0	64.6	65.1	66.2	67.7	68.0	67.6	67.6	67.8
DM: Foot Exam	35%	42.1	40.1	41.7	41.5	41.2	42.0	44.0	48.2	49.8	51.4	53.3	54.0
DM: Eye Exam	35%	13.3	16.7	19.3	19.8	20.2	22.7	23.1	24.3	24.9	25.0	25.7	26.7
DM: Nephropathy Assmt	75.6%	79.7	79.6	79	78.4	78.5	78.5	79.0	80.1	84.6	85.0	85.0	85.4
*Breast Cancer Screen	68.1%	66.6	67.1	67.8	68.7	69.3	68.7	69.8	70.5	70.6	70.1	70.4	70.2
*Colorectal Cancer Screen	54.2%	59.6	60.8	62.2	55.2	55.5	56.4	57.1	58.2	58.4	58.5	58.6	58.2
*Pneumonia Vaccine	65.2%	42.1	41.9	42.9	41.6	42.7	43.8	46.3	44.7	44.8	48.8	52.9	63.5
HTN BP < 140/90	77.2%	71.7	71.4	71.3	71.4	71.8	72.4	72.8	74.6	74.2	75.8	76.0	75.3
*Influenza Vaccine	31.0%	28.1	27.6	26.9	27.1								44.8
DM: Hgb A1c >9	23.7%	19.3	19.7	20.8	21.0	23.8	24.4	23.3	23.3	21.2	21.3	21.4	21.1

#### **Results**

#### **Scheduling Next Appointment At Current Appointment**

- Improvement seen in every clinic every month since inception of program
- Overall, from baseline, an estimated 9,547 additional visits were proactively scheduled (improves patient care/planning)

Month	Visits Scheduled	# Over Baseline
Baseline (May 2016)	5811	
June 2016	6042	231
July 2016	5513	-298
August 2016	7097	1286
September 2016	6908	1097
October 2016	7833	2022
November 2016	8476	2665
December 2016	8221	2410
Total		9547

Total Visit Scheduled Over Baseline	Potential No Show	Average Net Revenue	Net Revenue Projected from
	Rate (30)	Per Visit (\$138.53)	Scheduling Next Project
9547	9547 – 2864 = 6683	X \$138.53	\$925,795.00

Not all add'l revenue, but now planned

#### Survey Monkey sent out to all UPC Methodist|Proctor Clinic Staff

- 263 Responded
  - One of the highest response rates known for an all-staff survey of this type

1. What is your current role at UnityPoint Clinic Peoria?					
Answer Options	Response Percent	Response Count			
Supervisor/Assistant Manager/Clinic Administrator	7.4%	19			
MOC/Front Desk	34.1%	88			
CMA/LPN/RN	39.9%	103			
Other Clinic Support Staff (Radiology or Lab Technician/Phlebotomy)	10.9%	28			
Navigator/Coordinator/Care Integration/Clinical Excellence	7.8%	20			
ar	nswered question	258			
	skipped question	5			

#### 2. How long have you worked in the role you are currently in?

Answer Options	Response Percent	Response Count
<1 year	16.7%	44
1- 3 years	33.5%	88
4 - 5 years	11.8%	31
6 - 7 years	6.5%	17
> 8 years	31.6%	83
an.	swered question	263
s	skipped question	0

- >8 Years included: 7 Supervisors/Clinic Administrators, 36 CMA/LPN/RN, 28 Front Desk, 9
   Other support staff roles
- 1-3 years included: 8 Supervisors/Clinic Administrators, 29 CMA/LPN/RN, 30 Front Desk, 6
   Other support staff roles
- <1 year included: 1 Supervisors/Clinic Administrators, 18 CMA/LPN/RN, 15 Front Desk, 6</li>
   Other support staff roles

## 3. Did you know that in 2016 UnityPoint Clinic piloted a Gaps in Care Incentive Plan for all Clinic Staff?

Answer Options	Response Percent	Response Count
Yes	85.4%	223
No	14.6%	38
	answered question	261
	skipped auestion	2

#### Notes of Interest:

- 6/28 (21%) support staff were not aware of the incentive plan
- 14/109 (12.8%) CMA/LPN/RN were not aware of the incentive plan
  - 4 >8 years, 4 <1 year, 4 1-3 years, 1 6-7 years
- 15/88 (17%) MOC/Front Desk were not aware of the incentive plan
  - 2 >8 years, 7 <1 year, 3 1-3 years, 3 4-5 years</li>
- 3/20 (15%) Navigator/Coordinator/Care Integration/Clinical Excellence were not aware of the incentive plan
  - All 1-3 years

100% of Supervisors/Clinic Administrators were aware of the incentive plan 38/264 (14%) of all respondents were not aware there incentive plan in 2016

Barrier! How do we educate everyone?

4. On a scale of 0-5 (0 no knowledge - 5 fully understand), how well do you feel you understand the goals of the Incentive Plan?

Answer Options	Response Percent	Response Count
0	4.3%	11
1	2.7%	7
2	1.9%	5
3	20.9%	54
4	30.6%	79
5	39.5%	102
ans	swered question	258
s	kipped question	5

- Score of 0-2 (little no knowledge) 23: 10 MOC/Front Desk,
   8 CMA/LPN/RN, 4 Other Clinic Support Staff, 1 Navigator/Coordinator/CI/CE
  - Of these 8 worked for UPH > 6 years, 7 < 3 years</li>

5. On a scale of 0-5 (0 no knowledge - 5 fully understand), how well do you feel you understand the workflows to meet the current quality metrics in the Incentive Plan?

Answer Options	Response Percent	Response Count
0	4.3%	11
1	3.5%	9
2	4.3%	11
3	13.7%	35
4	36.9%	94
5	37.3%	95
ans	swered question	255
s	kipped question	8

- 66 (26%) respondents felt they had none to moderate knowledge about the workflows needed to meet the current quality metrics
  - 27 MOC/Front Desk, 26 CMA/LPN/RN, 7 Other Clinic Support Staff, 4 Navigator/Coordinator/CI/CE, 1 Supervisor/Clinic Administrator

6. On a scale of 0-5 (0 no importance - 5 very important), how important is your role to meet the quality metrics in your clinic?

Answer Options	Response Percent	Response Count
0	2.8%	7
1	1.2%	3
2	1.2%	3
3	9.9%	25
4	21.4%	54
5	63.5%	160
ans	swered question	252
s	kipped question	11

- 214/252 (85%) of respondents felt their role had important to very importance on the impact of quality metrics in their clinic
- 38/252 (15%) of respondents felt their role had none to moderate importance on the impact of quality metrics in their clinic
  - 16 MOC/Front Desk, 11 CMA/LPN/RN, 7 Other Clinic Support Staff, 9
     Navigator/Coordinator/CI/CE, 1 Supervisor/Clinic Administrator

7. On a scale of 0 - 5 (0 no importance - 5 very important), how important is your role to meet the "Scheduling Next Appointment at the Current Appointment" metric?

Answer Options	Response Percent	Response Count
0	9.2%	24
1	5.7%	15
2	3.1%	8
3	12.2%	32
4	13.0%	34
5	56.9%	149
ans	swered question	262
S	kipped question	1

- 183/262 (69%) of respondents felt their role had important to very importance on the impact of Scheduling the Next Appointment at the Current in their clinic
- 47/262 (18%) of respondents felt their role had **none to moderate importance** on the impact of Scheduling the Next Appointment at the Current in their clinic
  - 6 MOC/Front Desk, 9 CMA/LPN/RN, 8 Other Clinic Support Staff, 1 Navigator/Coordinator/CI/CE, 0 Supervisor/Clinic Administrator

#### 8. Do you feel that the Incentive Plan was a successful program?

Answer Options	Response Percent	Response Count
Yes No	95.4% 4.6%	248 12
	swered question	260
S	kipped question	3

#### Notes of Interest:

• 248/262 (95%) felt the Incentive Plan was a success program!

#### Of those who felt the plan was not successful

- 4 MOC/Front Desk, 6 CMA/LPN/RN, 0 Other Clinic Support Staff,
   1 Navigator/Coordinator/CI/CE, 1 Supervisor/Clinic Administrator
   Comments by these respondents included:
  - "let me know what this is, never been to class" (MOC/Front Desk, >8 yrs)
    - "more education on it" (CMA/LPN/RN, >8 yrs)
    - "inform all staff of these incentive plans" (MOC/Front Desk, >8 yrs)
    - "unaware it was going on" (CMA/LPN/RN, >8 yrs)

9. Should the Incentive Plan be continued in 2017?	?	
Answer Options	Response Percent	Response Count
Yes	89.3%	233
Yes, with modification listed below in "comments"	9.6%	25
No	1.1%	3
Comments		37
	answered question	261
	skipped question	2

#### Notes of Interest:

• 233/261 (89%) felt the Incentive Plan should be continued!

## **Summary**

#### **Overall success!**

#### Lessons learned:

- Need more specialized metrics- good place to start
- Report out results more frequently
- Educate! Educate! And Validate that you did Educate!
- Set goals that are measureable throughout period-
  - Care gap numbers changed with patient populations
- Proactive Care Gap work and chart prep will reduce the amount of work to do with the patient in front of us!

# QUESTIONS???



## Thank You

